

WHAT IS CLAIMED IS:

1. A method for prevention of insulin-dependent diabetes comprising administering an effective amount of a cyclooxygenase-2 inhibitor or repressor of NF-κB activation to an individual having a possible predisposition to or showing signs of development of Type 1 diabetes.
2. The method of claim 1 wherein COX-2 activity is decreased by the inhibition or the repression.
3. The method of claim 1 wherein the cyclooxygenase-2 inhibitor is NS-398.
4. The method of claim 1 wherein the repressor is PDTC.
5. The method of claim 1 wherein the therapeutic effective amount of cyclooxygenase-2 inhibitor is from about 2 mg/kg to about 10 mg/kg body weight.
6. The method of claim 1 wherein the effective amount of repressor is from about 25 to about 250 mg/kg/day.
7. The method of claim 1 where the individual's predisposition is determined by at least one of a history of Type 1 diabetes in an immediate family member and finding antibodies directed toward antigens of the individual's pancreatic beta cells.

8. A method of inhibiting allograft rejections comprising administration of an effective amount of a COX-2 inhibitor or repressor of NF-κB activation to an allograft recipient.
9. The method of claim 5 wherein the allograft is pancreas, kidney, liver or heart.
10. A method for prevention of insulin-dependent diabetes comprising administering an effective amount of NS-398 or PTC to an individual having a possible predisposition to or showing signs of development of Type 1 diabetes.
11. A method for prevention of insulin-dependent diabetes comprising administering an effective amount of NS-398 to an individual having a possible predisposition to or showing signs of development of Type 1 diabetes.
12. A method for prevention of insulin-dependent diabetes comprising administering an effective amount of PDTC to an individual having a possible predisposition to or showing signs of development of Type 1 diabetes.
13. The method of claim 10 where the individual's predisposition is determined by at least one of a history of Type 1 diabetes in an immediate family member and finding antibodies directed toward antigens of the individual's pancreatic beta cells.
14. An inhibitor of COX-2 activity or a repressor of NF-κB activation for use in the prevention of Type I diabetes or allograft rejection.

15. A method for prevention or treatment of diabetic complications comprising administering an effective amount of a cyclooxygenase-2 inhibitor or repression of NF- $\kappa$ B activation to an individual having Type 1 diabetes.
16. The method of claim 15 where the complications are nephropathy, retinopathy, neuropathy or cardiovascular disease.
17. The method of claim 15 wherein COX-2 activity is decreased by the inhibition or the repression.
18. The method of claim 15 wherein the cyclooxygenase-2 inhibitor is NS-398.
19. The method of claim 15 wherein the repression is PDTC.
20. The method of claim 15 wherein the therapeutic effective amount of cyclooxygenase-2 inhibitor is from about 2 mg/kg to about 10 mg/kg body weight.
21. The method of claim 15 wherein the effective amount of repression is from about 25 to about 250 mg/kg/day.
22. A method for prevention or treatment of diabetic complications comprising administering an effective amount of NS-398 or PDTC to an individual having Type 1 diabetes.

23. A method for prevention or treatment of diabetic complications comprising administering an effective amount of NS-398 to an individual having Type 1 diabetes.